LLC-1

Articles of Organization of a Limited Liability Company (LLC)

To form a limited liability company in California, you can fill out this form, and submit for filling along with:

- A \$70 filing fee.
- A separate, non-refundable \$15 service fee also must be included, if you drop off the completed form or document.

Important! LLCs in California may have to pay a minimum \$800 yearly tax to the California Franchise Tax Board. For more information, go to https://www.ftb.ca.gov.

LLCs may not provide "professional services," as defined by California Corporations Code sections 13401(a) and 13401.3.

Note: Before submitting the completed form, you should consult with a private attorney for advice about your specific business needs.

201327310082

FILED Secretary of State State of California
SEP 2 6 2013



private atterney for advice abo	sat your opcome backless	0 1100do.	7,000 1 01 011100 000 01117
For question	ons about this form, go	to www.sos.ca.gov/business/be/filing	g-tips.htm.
LLC Name			
① PWIIP, LLC			
Proposed LLC Name	Liability Co." or "Ltd. Liat "inc.," "corporation," or	ith: "LLC," "L.L.C.," "Limited Liability Compan bility Company;" and may not include: "bank," "corp.," "Insurer," or "insurance compan tions, go to www.sos.ca.gov/business/be/name	"trust," "trustee," "incorporated," y." For general entity name
Purpose	roquironionio una roomo	10.0, go to 11.11.000.00.go (10.000.000.00.00.00.00.00.00.00.00.00.00	a validating main.
		o engage in any lawful act or activity (illea Limited Liability Company Act.	for which a limited liability
LLC Addresses			
③ a. 227 Hivista Road	j	Sausalito	CA 94965
Initial Street Address of L	LC	City (no abbreviations)	State Zip
b			
Initial Malling Address of	LLC, if different from 3a	City (no abbreviations)	State Zip
(a) a. Demosthenis Howards Road b. 227 Hivista Road Agent's Street Address (Agent's Agent's	untalas	Sausalito City (no abbreviations)	CA 94965
Management (Check only one.)	•	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
⑤ The LLC will be manage	DECEMBER 1	Manager All Limited Liability	Company Member(s)
This form must be signed by each paper (8 1/2" x 11"). All attachments	organizer. If you need more s are made part of these artic	e space, attach extra pages that are 1-side cles of organization.	d and on standard letter-sized
· Cagh	Δ:	aron M. Gumbinger	
Organizer - Sign here		Print your name here	Managery
Make check/money order payable to	Secretary of State	By Mail	Drop-Off
Upon filing, we will return one (1) und document for free, and will certify the payment of a \$5 certification fee.		Secretary of State Business Entitles, P.O. Box 944228 Sacramento, CA 94244-2280	Secretary of State 1500 11th Street., 3rd Floor Sacramento, CA 95814